



PTO/SB/30 (07-06)

Approved for use through 9/30/2006. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>Request for Continued Examination (RCE) Transmittal</b>  Address to: <b>Mail Stop RCE Commissioner for Patents P. O Box 1450 Alexandria, VA 22313-1450</b>	<b>Application Number</b> <b>10/728,597</b> <b>Filing Date</b> <b>December 5, 2003</b> <b>First Named Inventor</b> <b>Toshiharu ENMEI</b> <b>Art Unit</b> <b>2626</b> <b>Examiner Name</b> <b>Madeleine A. NGUYEN</b> <b>Attorney Docket Number</b> <b>ADACHI P192USD5</b>
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**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**  
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- may
- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other: \_\_\_\_\_
- b. ☒ Enclosed
- i. ☐ Amendment/Reply
- iii. ☐ Information Disclosure Statement (IDS)
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☒ Other Supplemental Response to follow within a few days
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months. Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. **04-0213**. **I HAVE ENCLOSED A DUPLICATE COPY OF THIS SHEET.**
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☒ Check in the amount of \$395 is enclosed.
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

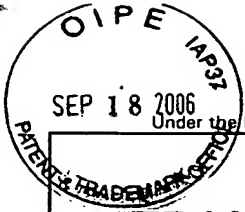
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>	
Signature: _____	Date: <b>09/13/6</b>
Name: <b>Michael J. Bujold</b>	Registration No.: <b>32,018</b>
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.	
Signature: _____	Date: <b>09/13/6</b>
Name: <b>Michael J. Bujold</b>	

395.00 0P

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/728,597	
Filing Date	December 5, 2003	
First Named Inventor	Toshiharu ENMEI	
Group Art Unit	2626	
Examiner Name	Madeleine A. NGUYEN	Fax: (571) 273-8300
Total No. of Pages in this Submission:3	Attorney Docket Number	ADACHI P192USD5

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee attached  <input type="checkbox"/> Amendment/Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request (in Duplicate)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Part/s Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful)  <input type="checkbox"/> To Convert a Provisional Petition  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):  Postcard RCE (+ dupl.) - 1pg
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REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	September 13, 2006	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 13, 2006.

Type or printed name	Michael J. Bujold	
Signature		Date: September 13, 2006 (tac)

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<div style="display: flex; align-items: center;"> <div> <p><b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p style="font-size: 1.2em; font-weight: bold;">FEE TRANSMITTAL For FY 2006</p> <p>Applicant claims small entity status. See 37 CFR 1.27</p> </div> </div>	<p style="text-align: center; font-weight: bold;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> Application No. Filing Date First Named Inventor Examiner Name Art Unit </td> <td style="width: 50%; padding: 5px;"> 10/728,597 December 5, 2003 Toshiharu ENMEI Madeleine A. NGUYEN 2626 </td> </tr> <tr> <td style="padding: 5px;"> Attorney Docket No. </td> <td style="padding: 5px;"> ADACHI P192USD5 </td> </tr> </table>	Application No. Filing Date First Named Inventor Examiner Name Art Unit	10/728,597 December 5, 2003 Toshiharu ENMEI Madeleine A. NGUYEN 2626	Attorney Docket No.	ADACHI P192USD5
Application No. Filing Date First Named Inventor Examiner Name Art Unit	10/728,597 December 5, 2003 Toshiharu ENMEI Madeleine A. NGUYEN 2626				
Attorney Docket No.	ADACHI P192USD5				
<b>TOTAL AMOUNT OF PAYMENT: \$395.00</b>					

**METHOD OF PAYMENT** (check all that apply)

☒ Check    
☐ Credit Card    
☐ Money Order    
☐ None    
☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account    
Deposit Account Number 04-0213    
Deposit Account Name: DAVIS & BUJOLD, P.L.L.C

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below    
☐ Charge fee(s) indicated below except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    
☐ Credit any overpayments

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**FEE CALCULATION**

1. **BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. **EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims -20 or HP = Extra Claims x Fee (\$) = Fee Paid (\$)    
Multiple Dependent Claims  
Fee (\$)     Fee Paid (\$)

Indep. Claims -3 or HP + Extra Claims x Fee (\$) = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. **APPLICATION SIZE FEE**  
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets -100 = Extra Sheets / 50 = No. of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)

4. **OTHER FEE(S)**

Other (e.g., late filing surcharge): RCE (+dupl.)     **\$395.00**

**SUBMITTED BY**

Signature		Telephone (603) 226-7490
Name (Print/Type)	Michael J. Bujold	Registration No. (Atty/Agent) 32,018 Date: September 13, 2006